

AMENDMENTS TO THE SPECIFICATION:

Please replace the paragraph which begins at page 10, line 16 with the following:

The present invention provides a method of treating or preventing Parkinson's disease, which method comprises administration to a patient in need of such treatment of an amount of a therapeutically effective amount of a selective COX-2 inhibitor, such as rofecoxib (VIOXX®), celecoxib (CELEBREX®), valdecoxib (BEXTRA®), etoricoxib (ARCOXIA®) or lumiracoxib (COX-189) ~~VIOXX, CELEBREX, BEXTRA, ARCOXIA or COX-189~~.

Please replace the paragraph which begins at page 10, line 20 with the following paragraph:

The invention also provides a method of treating Parkinson's disease in patients for which symptomatic relief by administration of an antiparkinson agent is not indicated, comprising the administration of a therapeutically effective amount of a selective COX-2 inhibitor such as rofecoxib (VIOXX®), celecoxib (CELEBREX®), valdecoxib (BEXTRA®), etoricoxib (ARCOXIA®) or lumiracoxib (COX-189) ~~VIOXX, CELEBREX, BEXTRA, ARCOXIA or COX-189~~. For purposes of this application, patients for which symptomatic relief is not indicated includes patients with early stage Parkinson's disease and patients with minimal or mild symptoms as well as patients for whom antiparkinson agents are contraindicated. As will be appreciated by those of skill in the art, antiparkinson agent, as the term is used in this specification, does not include selective inhibitors of COX-2.

Please replace the paragraph which begins at page 15, line 10 with the following paragraph:

Patent 1, a 51 year old woman, was administered Part III (motor examination) of the Unified Parkinson's Disease Rating Scale (hereinunder abbreviated as UPDRS) and diagnosed as having Parkinson's disease (scoring a 20 in the test). After a period of evaluation of drug therapy options, the patient was prescribed pergolide, 0.25mg tid and selegiline 5mg po. After six (6) months on drug therapy, the patient was once again examined with the UPDRS motor subset and scored 16.5. After three (3) months on the drug,

25mg of rofecoxib (VIOXX®)-VIOXX, once a day was added to the treatment regime. After four (4) additional months, the patient was once again administered the UPDRS, this time scoring a 6.0. After six (6) months on the rofecoxib (VIOXX®)-VIOXX tripartite therapy, the patient was again administered the UPDRS motor examination and scored 4.0. (see Fahn S, Elton RL, Members of the UPDRS Development Committee. Unified Parkinson's disease rating scale. In: Fahn S, Marsden CD, Calne D, Goldstein M, eds. Recent developments in Parkinson's disease, Vol II. Florham Park, NJ: Macmillan Healthcare Information, 1987:153-163, 293-304):

Please replace the paragraph which begins at page 15, line 26 with the following paragraph:

Patient 2, a man over 40 years of age is evaluated by the UPDRS and is diagnosed as having Parkinson's disease. Patient 2 is initially prescribed one SINEMET 25-100 tid, with the dosage increased slowly by 50 mg of levodopa until the maximum benefit is achieved. The patient is also prescribed 12.5 mg or 25mg or 50mg of rofecoxib (VIOXX®)-VIOXX, once a day.

Please replace the paragraph which begins at page 16, line 3 with the following paragraph:

Patient 3, an adult of over 40 years of age is evaluated by the UPDRS and is diagnosed as having Parkinson's disease. Patient 3 has minimal symptoms and administration of an antiparkinson drug is not indicated. The patient is prescribed 12.5 mg or 25mg or 50mg of rofecoxib (VIOXX®)-VIOXX, once a day.

Please replace the paragraph which begins at page 16, line 10 with the following paragraph:

Patient 4, an adult over 40 years of age, is administered the Unified Parkinson's Disease Rating Scale motor skills test (UPDRS) and diagnosed as having Parkinson's disease. The patient is prescribed a dopamine receptor agonist, Permax, 0.25mg tid and 12.5mg or 25mg or 50mg of rofecoxib (VIOXX®)-VIOXX once a day.

Please replace the paragraph which begins at page 16, line 17 with the following paragraph:

Patient 5, a 49 year old man, is examined with the UPDRS and is diagnosed as having early, mild, Stage I Parkinson's disease (scoring a 10 on the motor subscale). He is not functionally limited by his disease and does not require dopaminergic therapy. Patient 5 is prescribed 25mg of rofecoxib (VIOXX®)-VIOXX, once a day.

Please replace the paragraph which begins at page 16, line 24 with the following paragraph:

Patient 6, a 62 year old man, is examined with the UPDRS and is diagnosed as having moderate Parkinson's disease (scoring 20 on the motor subscale). He is functionally limited by his disease and requires dopaminergic therapy. He is started on pramipexole and the dose increased gradually to 1.5 mg TID. He improves greatly, but still has some difficulty with activities of daily living. Patient 6 is prescribed 25mg of rofecoxib (VIOXX®)-VIOXX, once a day, to supplement his dopamine agonist.

Please replace the paragraph which begins at page 17, line 3 with the following paragraph:

Patient 7, a 78 year old man, is examined with the UPDRS and is diagnosed as having Stage III Parkinson's disease (scoring 28 on the motor subscale). In addition, he shows some mild, early cognitive abnormalities typical of subcortical dysfunction. He is started on carbidopa/levodopa, 25/100 and gradually titrated up to 2 tablets in the morning and 1.5 tablets in the early afternoon and after dinner. He has fair improvement, but further increases are limited by cognitive side effects. Patient 7 is prescribed 25mg of rofecoxib (VIOXX®)-VIOXX, once a day.

Please replace the paragraph which begins at page 17, line 12 with the following paragraph:

Patient 8, an adult male 73 years of age, was diagnosed as having Parkinson's disease. After evaluation the patient was prescribed Endo L-C 100-25, TID. Approximately three years later, the patient began taking rofecoxib (VIOXX®)-VIOXX (25 mg) once a day.

After three weeks, patient noticed that severity of tremors had decreased and the frequency between the tremors had increased. In addition, night time tremors, those associated with sleeping, had dramatically subsided (i.e. by up to 90%). Overall, the patient reports that the tremors have subsided nearly 40%.